

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0255
Date:	8-10-21
Amount Paid:	\$150 8-10-21 TRANSFERED From CUP.
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER	
Owner's Name: Reginald & Marie Christiansen	
Mailing Address: PO Box 561 Ellsworth WI 54011	
City/State/Zip: Ellsworth WI 54011	
Telephone: 715-307-8170	
Address of Property: 8760 County Rd N	
City/State/Zip: Drummond WI 54832	
Cell Phone: 715-307-8170	
Plumber Phone:	
Contractor: Reginald & Marie Christiansen	
Contractor Phone: 715-307-8170	
Plumber:	
Authorized Agent: (Person Signing Application on behalf of Owner(s))	
Agent Phone:	
Agent Mailing Address (include City/State/Zip):	
Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No	
PROJECT LOCATION	Legal Description: (Use Tax Statement)
Tax ID#	Recorded Document: (Showing Ownership)
NW 1/4, NE 1/4	Gov't Lot
Lot(s)	CSM
Vol & Page	CSM Doc #
Lot(s) #	Block #
Subdivision:	
Section 32, Township 45 N, Range 08 W	Town of: Drummond
Lot Size	Acreage
16.000	16.000

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$60,000	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input checked="" type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(20' X 24')	480'
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use	<input checked="" type="checkbox"/>	with a Deck	(8' X 20')	160'
		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building (explain) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Reginald Christiansen Marie Christiansen
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date: 7/16/2021

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: _____

Address to send permit: PO Box 561 Ellsworth WI 54011

Attach
Copy of Tax Statement

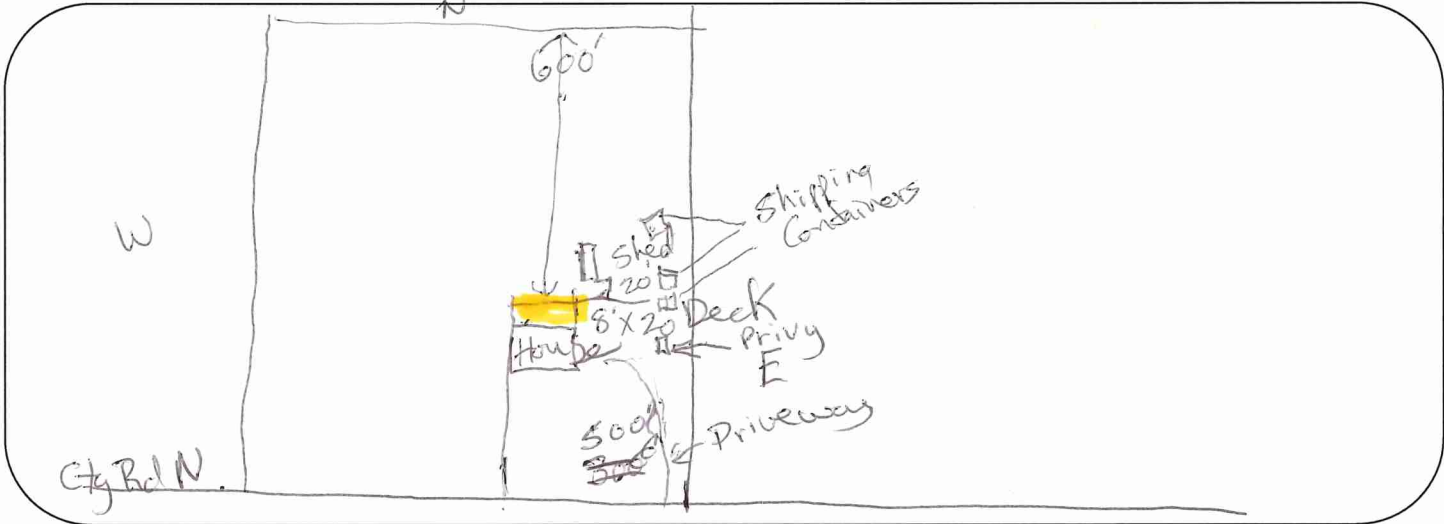
If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: **Proposed Construction**
 (2) Show / Indicate: **North (N) on Plot Plan**
 (3) Show Location of (*): **(*) Driveway and (*) Frontage Road** (Name Frontage Road)
 (4) Show: **All Existing Structures on your Property**
 (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
 (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
 (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	280' Feet		Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	600' Feet			
Setback from the South Lot Line	235' Feet		Setback from Wetland	Feet
Setback from the West Lot Line	300' Feet		20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	500' Feet		Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet		Setback to Well	Feet
Setback to Drain Field	Feet			
Setback to Privy (Portable, Composting)	260' Feet			
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.				
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.				

- (9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms:		Sanitary Date:	
Permit Denied (Date):		Reason for Denial:					
Permit #: 21-0255		Permit Date: 8-10-21					
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)				Previously Granted by Variance (B.O.A.)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Case #:		Case #:		Case #:		Case #:	
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:						Zoning District (F-1)	
						Lakes Classification (NA)	
Date of Inspection: 7/6/21		Inspected by: [Signature]		Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)							
Build as proposed No Additional sleeping areas upon property without permits							
Signature of Inspector: [Signature]						Date of Approval: 8/10/21	
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	

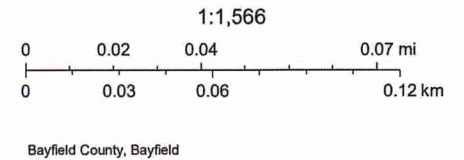
Bayfield County, WI



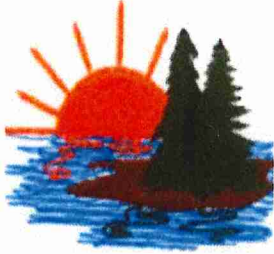
7/23/2021, 11:46:04 AM

- | | | |
|-----------------------------|------------------------------|-----------|
| Meander Lines | All Roads | New |
| Approximate Parcel Boundary | County | Driveways |
| Section Lines | Building Footprint 2009-2015 | Buildings |
| Municipal Boundary | Existing | |

Handwritten red text: CDP, VS, LUP, VS, OK







BAYFIELD COUNTY PLANNING AND ZONING DEPARTMENT

Bayfield County Courthouse
117 East Fifth Street
Post Office Box 58
Washburn, WI 54891



Telephone: (715) 373-6138
Fax: (715) 373-0114

E-mail: zoning@bayfieldcounty.org
Web Site: www.bayfieldcounty.org/zoning

June 23, 2021

REGINALD C & MARIE A CHRISTIANSEN
PO BOX 561
ELLSWORTH WI 54011

Notice of Violation & Order to Correct

RE: A Parcel of Land Described as NW NE EXC W 48 RODS IN V.1131 P.808 1056 Section 32 Township 45N Range 8 West, Town of Drummond, Bayfield County Wisconsin, Tax ID# 15000 (property address 49345 Blue Moon Rd).

To Whom it may concern:

Recently, it has come to the attention of the Bayfield County Planning and Zoning Department (department) that **more than 3 campers** (RV's) have been placed at different times of the year, on the above described properties. As per State Statutes Chapter ATCP 79.05 and County Ordinances more than 3 campers are not allowed at this location. In the County Zoning Ordinance the activity of this nature is regulated, and the following parts of the ordinance appear to conflict with your activity. Title 13 Chapter 1, Article B Sec. 13-1-21(b), Sec.13-1-28, Sec. 13-1-41, Sec. 13-1-42 & Title 15 Chapter 1.

It has also been noted that at a minimum a **deck has been added** to a structure without permits.

Therefore, this letter serves as notice of violation with the above referenced Sections of the Ordinance and, assuming information stated herein is correct, to officially notify you that the department will require you to do the following by **July 25, 2021**

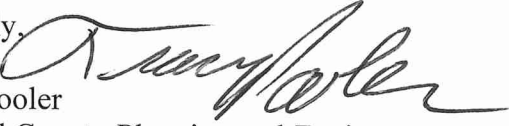
- **Remove all RV's and their associated structures except for three(3).**
Or
- **Apply by the deadline above to obtain an After-the-Fact Conditional Use Permit** with Environmental Impact Analysis to allow for a private campground in a F-1 zoning district to allow for more than the 3 RV's upon the site. (Sec13-1-28)
and
- Obtain **After-the-Fact permits** on structural and use changes to structures on the parcel.

Should you choose not to comply with this request &/or continue construction/use without zoning approvals, you may be subject to further penalties and/or enforcement action(s) such as a citation, or a summons and complaint may be filed with the Clerk of Courts which may result in daily fines imposed

by the court of up to \$500.00 per day. Please note, the department would rather not have to take such actions.

If you have any questions, need to clarify any false assumptions or misinformation, or require additional information regarding this matter, please feel free to contact me at (715) 373-6138 or at tracy.pooler@bayfieldcounty.wi.gov . I thank you for your cooperation in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Tracy Pooler", written over the printed name.

Tracy Pooler
Bayfield County Planning and Zoning
Assistant Zoning Administrator


Description		Updated: 9/22/2014
Parcel ID:	15000	
APN:	04-018-2-45-08-32-1 02-000-10000	
Legacy PIN:	018113403000	
Map ID:		
Municipality:	(018) TOWN OF DRUMMOND	
Tract:	S32 T45N R08W	
Description:	NW NE EXC W 48 RODS IN V.1131 P.808 1056	
Recorded Acres:	16.000	
Calculated Acres:	20.490	
Unrecorded Claims:	0	
First Dollar:	Yes	
Improvement:	(F-1) Forestry-1	
Map ID:	112	

Tax Districts		Updated: 3/15/2006
	STATE	
	COUNTY	
0.8	TOWN OF DRUMMOND	
0.1491	SCHL-DRUMMOND	
0.1700	TECHNICAL COLLEGE	

Recorded Documents		Updated: 3/15/2006
TRUSTEES DEED		
Date Recorded: 9/17/2014	2014R-555933 1131-808	
TERMINATION OF DECEDENT'S INTEREST		
Date Recorded: 9/17/2014	2014R-555932 1131-804	
CONVERSION		
Date Recorded:	291-106;544-227	
WARRANTY DEED		
Date Recorded: 12/6/1991	395936 544-227	

Ownership		Updated: 9/22/2014
REGINALD C & MARIE A CHRISTIANSEN		ELLSWORTH WI
Billing Address:	Mailing Address:	
REGINALD C & MARIE A CHRISTIANSEN	REGINALD C & MARIE A CHRISTIANSEN	
PO BOX 561	PO BOX 561	
ELLSWORTH WI 54011	ELLSWORTH WI 54011	

Site Address		* indicates Private Road
8760 COUNTY HWY N	DRUMMOND 54832	



Property Assessment

Updated: 5/7/2020

2021 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	10,000	18,100
G6-PRODUCTIVE FOREST	15.000	18,800	0

2-Year Comparison			
	2020	2021	Change
Land:	28,800	28,800	0.0%
Improved:	18,100	18,100	0.0%
Total:	46,900	46,900	0.0%

Property History
N/A

Town, City, Village, State or Federal
Permits May Also Be Required

After-the-Fact

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0255** Issued To: **Reginald & Marie Christiansen**

Location: **NW** ¼ of **NE** ¼ Section **32** Township **45** N. Range **8** W. Town of **Drummond**

Gov't Lot Lot Block Subdivision CSM#

For: **Residential Addition / Alteration: [1- Story; Deck (8' x 20') = 160 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed. No additional sleeping area upon property without permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

August 10, 2021

Date